

FILE EFFECTIVE



# ARTICLES OF ORGANIZATION LIMITED LIABILITY COMPANY

(Instructions on back of application)

1. The name of the limited liability company is:

OVERLAND PROPERTY LLC

2. The street address of the initial registered office is:

4890 ELLICOTT LN BOISE ID 83714

and the name of the initial registered agent at the above address is:

JACQUIE A ELCOX

3. The mailing address for future correspondence is:

4890 ELLICOTT LN BOISE ID 83714

4. Management of the limited liability company will be vested in:

Manager(s) ☐ or Member(s) ☒ (please check the appropriate box)

5. If management is to be vested in one or more manager(s), list the name(s) and address(es) or at least one initial manager. If management is to be vested in the member(s), list the name(s) and address(es) of at least one initial member.

Name

Address

JACQUIE A ELCOX

4890 ELLICOTT LN BOISE ID 83714

6. Signature of at least one person responsible for forming the limited liability company:

Signature:

Typed Name:

Capacity: Member

Signature

Typed Name:

Capacity:

Secretary of State use only

IDAHO SECRETARY OF STATE

04/18/2005 05:00

CK: 1271 CT: 170159 BH: 005133

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Revised 07/2002

Web Form

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